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## Florida Department of State

Division of Corporations **Public Access System** Sandra B. Mortham, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 487-6013

Account Name : LUIS E. GONZALEZ

Account Number: I19980000060

Phone : (305) 820-8300 → Yeny

: (305)820-8353 Fax Number

## FLORIDA PROFIT CORPORATION OR P.A.

FAMILY POOL, CORP.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 1       |
| Page Count            | 05      |
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W98.2420

ARTICLE OF INCORPORATION

FILED 98 OCT 26 PM 1: 06

OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FAMILY POOL, CORP.

#### ARTICLE I

The name of the corporation is: FAMILY POOL, CORP.

#### ARTICLE II

The Corporation may engage in or transact in any or in all activity or business permitted under the laws of the United States and of the State of Florida.

#### ARTICLE III

The Corporation is authorized to issue an have outstanding an aggregate number of One Hundred (100) shares of one class of common stock, having a par-value of One (\$1.00) Dollar per share. This consideration to be paid for each share of stock shall be fixed by the Board of Directors.

#### ARTICLE IV

All shareholders of the Corporation shall be vested with full preemptive rights.

#### ARTICLE V

The Corporation initial Registered Agent and Registered Office in the State of Florida are:

INITIAL REGISTERED AGENT: LUIS E. GONZALEZ

INITIAL PRINCIPAL OFFICE : 8948 NW 121 St.

Hialeah Gardens, Fl 33018

Having been named Initial Registered Agent to accept services of process of the Corporation at the Initial Registered Office designated in these Articles of Incorporation, I hereby accept such and consent to act in this capacity and agree to comply with all the requirements of the law pertaining thereto.

Yenisleydis Galban 8948 N.W. 121 ST. Hinlean Gardens, FL 23018 (305) 820-8300

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#### ARTICLE VI

the number of Directors constituting the Initial Board of Directors of the Corporation is two, the number of Directors may be increased or decreased from time to time by Laws but shall never be less than one.

#### ARTICLE VII

The name and address of the members of the initial Board of Directors is:

Name

Address

Luis E. Gonzalez

8948 NW 121st. St.

Hialeah Gardens, Fl 33018

Yenisleydis Galban

8948 NW 121st. St.

Hialeah Gardens, Fl 33018

#### ARTICLE VIII

The name and address of the Incorporates executing these Articles of Incorporation are:

Title/Name

President:

Luis E. Gonzalez

Address

8948 NW 121st. St.

Hialeah Gardens, Fl 33018

Vice-President

Yenisleydis Galban

8948 NW 121st. St.

Hialeah Gardens, Fl 33018

Luis E. Conzalez

Date

Yenisleydis Galban

Data

ACKNOWLEDGMENT

STATE OF FLORIDA COUNTY OF MIAMI DADE ]

Before a Notary Public authorized to take acknowledgment in the STATE OF FLORIDA and COUNTY OF MIAMI DADE, set forth above, personally appeared Luis E. Gonzalez and Yenisleydis Galban known to me and they acknowledged before me that they executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have set here unto my hand and seal affixed in the STATE OF FLORIDA, COUNTY OF MIAMI DADE, this 22nd day of October, 1998

Notary Public

STATE OF FLORIDA AT

My commission expires:  $\int an 15, 2001$ .

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501 and 617.0501, Florida Statutes the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

#### FAMILY POOL, CORP.

2. The name and addresses of the registered agent and office is:

Luis E. Gonzalez 8948 NW 121st St. Hialcah Gardens, Fl 33018

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICES.
OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PEACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT

Signature:

Date.

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